`	MU	JLTIPL	E DEP	ENDEN	T CLA	IM	SERIAL NO. FILING DATE								
Ī	FEE CALCULATION SHEET								10/54/17-1						
	(FOR USE WITH FORM PTO-875)								PPLICANT(S)						
				-			CLAIM	<u> </u>							
<b> </b> -	T .		AF	TER ·	AF		3								
]	AS FILED		I AMENDMENT		AFTER 1 ** AMENDMENT		İ		AS FILED IND. DEP.		AFTER CAMENDMENT		AFTER		
	IND.	IND. DEP.		IND. DEP.		IND. DEP.					·····		1 AMENDMENT.		
1	1					DEI.	1 h	51	IND.	DEP.	IND.	DEP.	IND.	DEP.	
2							1	52					<b></b>	<del> </del>	
3	ļ	8						53			·		<del></del>	<del> </del>	
5		80			·	<b> </b>		54						<u> </u>	
6		8				<u> </u>	<b>!</b>	55 56							
7		0					l	57						<u> </u>	
8	<del></del>	0						58							
9 10	<del></del>	8						59							
11		m						60 61							
12		$\hat{0}$					<u> </u>	62							
13		0						63					ļ		
14 15		33						64						i	
16							-	65 66							
17		0			-		<b> </b>	67				<del></del>			
18				•				68						<u>-</u>	
19 20				1.			- 1	69							
21	_						-	70 71							
22							-	72						i	
23								73							
24 25							-	74							
26							-	75 76							
27								77							
28 29							-	78						· .	
30		<del></del>		<del></del> 1			-	79 80				·		· ·	
31							F	81							
32								82							
33								83 84							
35								85							
36								86							
37 38								87							
39							-	88 89							
40								90					<del></del>		
41								91					·		
42				<del></del>			-	92 93							
44				-			-	93				- 65			
45								95							
46								96							
47 48	·						-	97 98							
49							-	99							
50								100							
TOTAL IND.	3	#		4		₩	ī	OTAL IND.		#		4	•	4	
TOTAL DEP	11	<del> </del>		4		4	J.,.	OTAL DEP		<b>4=</b>		4		40	
TOTAL CLAIMS	19							TOTAL CLAIMS							
PTO - 1360	(REV. 11/04)	)								S. DEPARTS			•		